## **Application for Eden Summer Grounds and Maintenance**

First Name:	Last Name:
Address:	
City: State:	Zip:
Phone Number:	Email:
Date of Birth (must be at least 18 ye	ears old):
Are you a previous Eden Recrea	ation Employee? Yes $\square$ No $\square$
Number of years: Posit	ion:
Do you have a valid driver's lic	ense? Yes □ No □
Please describe any previous e	experience and/or training for the position:
Previous work Experience:	
Job #1 Title:	Duration at Job:
Duties:	
Employer:	Contact phone number:
Job #2 Title:	
	Contact phone number:

References:	
First Name:	Last Name:
Street Address:	
City: State	e: Zip Code:
Phone Number:	
First Name:	Last Name:
Street Address:	
City: State:	Zip Code:
Phone Number:	
Please describe any personal interests or	
*If you are unable to commit to the entire below (missing a day for a college visit):	e season as listed above, please put your exceptions
I hereby affirm that the above informatio	n is true and accurate
Signature:	
Date:	
can also be dropped off at the Town Clerk	o Marlene at <a href="mailed-to-Eden Recreation">admin@edenny.gov</a> . The application of softice or mailed to Eden Recreation, 2795 E. my questions, please call 992-3408 opt. 1.